2022-12A 306379

Telecommunications Carriers

AUTHORIZED UTILITY REPRESENTATIVE FORM

,	AOTHORIZED	011011	IXEI IXEOE			
	CERT	FICATED CO	MPANY INFORM	ATION		
Company Name:	Crown Castle Fiber LLC			FEIN/SS	FEIN/SS	
DBA/FKA: N/A				Telepho	Telephone # 724-416-2000	
Mailing Address:	2000 Corporate Drive					
City: Canonsburg		State: PA		ZIP Cod	ZIP Code: 15317	
ILEC	IXC		CLECX		Wireless ETC	
	RE	GISTERED AC	SENT INFORMAT	TION		
Registered Agent	CT Corporation System					
Mailing Address:	600 N. 2nd Street. Suite 401					
City: Harrisburg		State: PA		ZIP Cod	ZIP Code: 15317	

As required by Commission rules and regulations Print or type company contact person and contact information for the areas listed below:

	011111	REPRESENTATIVE INFORM	
General Manager			
Name: Chris Levendos			
Address: 360 Hamilton Avenue			
City: White Plains	5	State: NY	ZIP Code: 10601
Phone: 877-486-9377	Email: Chris	.Levendos@crowncastle.com	Fax: 703-434-8510
Emergency Contact - Non	Office Hour	'S	
Name: Stephen George		,	
Phone: 978-268-9370	Email: Steph	nen.George@crowncastle.com	Fax: 703-434-8510
Customer Relations/Comp	plaints Rep		
Name: Sheldon Jordan			
Address: 3605 NW 82ND AVE			
City: Doral		State: FL	ZIP Code: 33166
Phone: 855-933-4237	Email: Shelde	on.Jordan@crowncastle.com	Fax: 703-434-8510
Complaints Rep for Comp	laint Escalat	ion	
Name: Rebecca Hussey			
Address: 2 Easton Oval Suite 42	5		
City: Columbus		State: OH	ZIP Code: 43219
Phone: 585-568-8469	Email: Rebec	ca.Hussey@crowncastle.com	Fax: 703-434-8510
Customer Toll Free Conta	ct Number: 8	55-933-4237	
Engineering Operations		,, 2	
Name: Sheldon Jordan			
Address: 3605 NW 82ND AVE	de transcendi trapi i materia i		
City: Doral		State: FL	ZIP Code: 33166
none: 855-933-4237 Email: Sheld		don.Jordan@crowncastle.com Fax: 703-434-8510 ECEIV	
Test and Repair			Fax: 703-434-85 RECEIV
Name: Sheldon Jordan			MAR 29 2
Address: 3605 NW 82ND AVE			lilials :
City: Doral		State: FL	ZIP Code: 33166
Phone: 855-933-4237	- 11 -	don.Jordan@crowncastle.com	Fax: 703-434-8510

	UTILI	TY REPRESENTATIVE INFORMATION	N	
Regulatory Officer				
Name & Title: Deborah Kelly, Ta	x Officer			
Address: 2000 Corporate Drive				
City: Canonsburg		State: PA	ZIP Code: 15317	
Phone: 727-416-2000	Email: PU	Correspondence@crowncastle.com; Deborah.Kelley@crowncastle.com	Fax: 703-434-8510	
Annual Report Form Mailin	gs		107	
Name & Title: Fernanda Hilb, Mg	r. Regulator	y Affairs		
Address: 2000 Corporate Drive				
City: Canonsburg		State: PA	ZIP Code: 15317	
Phone: 703-434-8533	Email: Puo	.Correspondence@crowncastle.com; Fernanda.Hilb@crowncastle.co	m Fax: 703-434-8510	
Dual Party Invoice Mailing	S			
Name & Title: N/A				
Address: N/A				
City: N/A		State: N/A	ZIP Code: N/A	
Phone: N/A	Email: N/A		Fax: N/A	
Universal Service Fund Ma	ilings			
Name & Title: Fernanda Hilb, Mg	r. Regulator	Affairs		
Address: 2000 Corporate Drive				
City: Canonsburg		State: PA	ZIP Code: 15317	
Phone: 703-434-8533	Email: Puc	Correspondence@crowncastle.com; Fernanda.Hillo@crowncastle.co	m Fax: 703-434-8510	
Gross Receipts Mailings			-	
Name & Title: Fernanda Hilb, Mg	gr. Regulator	y Affairs		
Address: 2000 Corporate Drive				
City: Canonsburg		State: PA	ZIP Code: 15317	
Phone: 703-434-8533	Email: Pu	.comespondence@crowncastle.com; Fernanda.Hilb@crowncastle.com	ax: 703-434-8510	
Lifeline Contact				
Name & Title: N/A				
Address: N/A				
City: N/A		State: N/A Z	P Code: N/A	
Phone: N/A	Email: N/	A F	ax: N/A	

FORM PREPARER INFORMATION					
This form was completed by: Fernanda Hilb					
Signature: Jernanda Hill	,				
Title: Mgr. Regulatory Affairs		Date: 4/1/22			

RETURN COMPLETED FORM TO:

Public Service Commission of SC

Docketing Department

101 Executive Center Drive, Suite 100

Columbia, SC 29210

Office of Regulatory Staff

AND Attn. Kari Munn

1401 Main Street, Suite 800

Columbia, SC 29201